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**CONFIRMATION NO. 8895** 

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| APPLICANTS  |  |                        |              | <del></del> ·     |                        |                     |   |             |             |
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| ** CONTINUING DATA **********************************   |  |                        |              |                   |                        |                     |   |             |             |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED<br>** 01/08/2004  |  |                        |              |                   |                        |                     |   |             |             |
| Foreign Priority claimed  yes no  STATE OR  STATE OR  Verified and Acknowledged Examiners Signature Initials  STATE OR  COUNTRY |  |                        |              |                   | SH                     | SHEETS T            |   | TAL         | INDEPENDENT |
|   |  |                        |              |                   | DRA                    |                     |   | IMS<br>1    | CLAIMS<br>4 |
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| TITLE<br>Nitrosated and/or r  | nitrosy  | lated cyclooxygenase-2 | selective    | inhibitors, com   | positior               | ns and me           | ethods o                                | f use       |             |
|   |  |                        |              |                   |                        | ☐ All Fe            | ees                                     |             |             |
|   |  |                        | _            |                   |                        |                     | Fees (F                                 | iling )     |             |
|   | FEES: Authority has been given in Pap<br>No to charge/credit DEPC<br>No for following: |                        |              | er<br>SIT ACCOUNT | 1.17 time )            | Fees ( F            | rocess                                  | ing Ext. of |             |
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